Image# 14950066518 PAGE 1 / 19

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office Us	e Only	
	NAME OF COMMITTEE (in f		PE OR PRIN	_	example: If typover the lines.	ing, type	12FE4M	15		
O	ceans PAC									
ADD	RESS (number and		700 13th Stree	et, NW						
·	Check if diffe		Suite 600							
Ш	than previous reported. (AC	ly	Washington				DC	20005		
2.	FEC IDENTIFICA	ATION NUME	BER ▼	CITY 🛦		5	STATE 🛦		ZIP CODE	\
	C C00431601			3. IS THIS REPOR		NEW (N) OR		AMENDED (A)		
	TYPE OF REP (Choose One)	ORT	(b) Monthly Report	Feb 20 (N	12)	May 20 (M5)	× Au	ug 20 (M8)	(Non	20 (M11) -Election Only)
	(a) Quarterly Rep	orts:	Due On:	Mar 20 (N		Jun 20 (M6)	-	ep 20 (M9)	(Non Year	20 (M12) -Election Only)
	April 15	Report (Q1)		Apr 20 (N	14)	Jul 20 (M7)	00	ct 20 (M10)	Jan	31 (YE)
	July 15	Report (Q2)		E-Election	Primary (12		1	al (12G)	Run	off (12R)
	October		Rep	port for the:	Convention	(12C)	Specia	ıl (12S)		
	January 3	Report (Q3) 31 Report (YE)		Election on	M = M /	D D /	YIYIYI	Y	in the State of	
	July 31 N	/lid-Year lon-election		Day ST-Election port for the:	General (30	G)	Runoff	(30R)	Spe	cial (30S)
	Terminati (TER)	on Report	ne	Election on	M = M /	D = D /	Y = Y = Y =	Y	in the State of	
5.	Covering Period	07	/ 01	2014	through	M M M	/ D D 31	/ Y Y 201	4	
I cer	tify that I have ex	amined this F	Report and to	o the best of my k	nowledge and	belief it is tru	e, correct a	and complet	e.	
Туре	or Print Name of	Treasurer	Grace Diaz							
Sign	ature of Treasurer	Grace Dia	az		[Electronical	ly Filed] D	ate 08	M / D 20		y y y y
NOT	E: Submission of fa	alse, erroneous	s, or incomple	ete information may	subject the pe	rson signing th	is Report to	the penaltic	es of 2 U.S.C	c. §437g.
I	Office Use Only								FORM 3	3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Oceans PAC 07 2014 07 2014 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 117805.71 January 1, 2014 (b) Cash on Hand at 81693.94 Beginning of Reporting Period..... 226509.19 42499.21 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 124193.15 344314.90 6(a) and 6(c) for Column B)..... 28449.90 248571.65 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 95743.25 95743.25 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

\cap	cea	ns	РΔ	C.
v	CCA	110	_	, ,

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
ontributions (other than loans) From:		
n) Individuals/Persons Other		
Than Political Committees		14057140
(i) Itemized (use Schedule A)	13250.00	146574.18
(2) 11 (1) (1)	4740.04	16435.01
	1749.21	10433.01
	14999.21	163009.19
Lines Tr(a)(i) and (ii)	, , , , , , , , , , , , , , , , , , ,	7
) Political Party Committees	0.00	0.00
(such as PACs)	27500.00	62500.00
l) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		22550 40
Totals to Line 33, page 5)▶	42499.21	225509.19
		0.00
arty Committees	0.00	0.00
II Lagna Dagaiyad	0.00	0.00
II Loans Received		0.00
	0.00	0.00
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
	7	0.00
	0.00	1000.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
· · · · · · · · · · · · · · · · · · ·		
Non-Federal Account		
(from Schedule H3)	0.00	0.00
_		
) Levin Funds (from Schedule H5)	0.00	0.00
e) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	(ii) Unitemized (use Schedule A)	(ii) Itemized (use Schedule A)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Jaiolidai Tour to Buto
(i) Federal Share	0.00	0.00
(i) I dudial dilate illiministration		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	05040.00	440040.00
Expenditures	25942.68	119040.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	25942.68	119040.20
Transfers to Affiliated/Other Party	20042.00	1130-10.20
Committees	0.00	0.00
Contributions to Federal Candidates/Committees		
and Other Political Committees	2500.00	129500.00
Independent Expenditures		
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loan Hopaymonio Mado		
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		
Than Political Committees	7.22	31.45
		0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	7.22	31.45
Other Disbursements	0.00	0.00
E		
Federal Election Activity (2 U.S.C. §431(20) (a) Allocated Federal Election Activity)	
(from Schedule H6)		
(i) Federal Share	0.00	0.00
()		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	28449.90	248571.65
, , , , , , , , , , , , , , , , , , , ,	201.000	2-100/1.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	28449.90	248571.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	42499.21	225509.19
4. Total Contribution Refunds (from Line 28(d))	7.22	31.45
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42491.99	225477.74
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	25942.68	119040.20
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	25942.68	119040.20

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 6 OF 19 Use separate schedule(s) for each category of the Detailed Summary Page

FUF	I LIIVE	IVU	IVIDED	FAGL	•	U	Oi	13
(che	ck only	or	ne)					
X	11a		11b	11c		12		
	13		14	15		16	;	17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Oceans PAC	,	
Full Name (Last, First, Middle Initial) Myron M. Cherry Mailing Address 30 North La Salle Street Suite 2300 City Chicago FEC ID number of contributing federal political committee. Name of Employer Myron M. Cherry & Associates, LLC Receipt For: Primary General Other (specify)	State Zip Code IL 60602-2504 C Occupation Attorney Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) B. Elva O'Brien Mailing Address 860 United Nations Plaza Apt. 22F City New York FEC ID number of contributing federal political committee. Name of Employer N/A Receipt For: Primary General Other (specify)	State Zip Code NY 10017 C Occupation Retired Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 07 23 2014 Transaction ID: C9688945 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Dariush P. Maanavi Mailing Address 1001 5th Ave. #4A City New York FEC ID number of contributing federal political committee. Name of Employer Trysail Advisors LLC Receipt For: Primary General Other (specify)	State Zip Code NY 10028 C Occupation Partner Aggregate Year-to-Date ▼ 5000.00	Date of Receipt M M M / D D / 2014 Transaction ID: C9670484A Amount of Each Receipt this Period 5000.00 * Earmarked Contribution: See Below
SUBTOTAL of Receipts This Page (optional)		7000.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS

federal political committee.

Other (specify)

Name of Employer

Primary

Receipt For:

General

c. ActBlue

Image# 14950066524 SCHEDULE A (FEC Form 3X	()		FOR L	INE N	UMBER:	PAG	E 7	OF	19
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page		only o	-	11c	12	2	17
Any information copied from such Reports ar or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full) Oceans PAC		7.							
Full Name (Last, First, Middle Initial) A. ActBlue			Date	e of F	leceipt				
Mailing Address P.O. Box 382110)7	10	/ Y	2014		
City	State	Zip Code	Tr	ansac	tion ID : C	967048	34AB		
Cambridge	MA	02238	Amo	ount o	f Each Re	ceipt th	is Peri	iod	
FEC ID number of contributing federal political committee.	C co	0401224			7	7	50	00.00	
Name of Employer	Occupation Conduit tota	al listed in Agg. field							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 12999.21	Note	MO IT : Abov nizatio	e Contribu	tion ear	marked	d throu	ugh th
Full Name (Last, First, Middle Initial) 3. Eric Kamerath			Date	e of F	Receipt				
Mailing Address 297 Summermeadow Cir)7	/ 09	/ Y	2014		
City	State	Zip Code	Tra	ansac	tion ID : C	967538	34A		
Bountiful	UT	84010	Amo	ount o	f Each Re	ceipt th	is Peri	iod	
FEC ID number of contributing federal political committee.	С				7	- 7	50	00.00	
Name of Employer Self Employed	Occupation Attorney								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	* Ear	marke	d Contribu	tion: Se	e Belo	w	
Full Name (Last, First, Middle Initial) C. ActBlue	'		Date	e of F	Receipt				
Mailing Address P.O. Box 382110)7	16	/ Y	2014		
City Cambridge	State MA	Zip Code 02238			tion ID : C			iod	
FEC ID number of contributing	C co	0401224					50	00.00)

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)		I	7	Ξ	Ξ	7	Ξ	50	00.00	0	
TOTAL This Period (last page this line number only)											

12999.21

Occupation

Conduit total listed in Agg. field

Aggregate Year-to-Date ▼

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 8 OF 19 Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		r each category of the etailed Summary Page	X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Oceans PAC			
Full Name (Last, First, Middle Initial) Alan C. Fox Mailing Address 12411 Ventura Blvd City Studio City FEC ID number of contributing federal political committee.	CA S	Zip Code 91604	Date of Receipt 07 27 2014 Transaction ID : C9706346A Amount of Each Receipt this Period
Name of Employer ACF Property Management Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation President Aggregate Year-	to-Date ▼ 1000.00	* Earmarked Contribution: See Below
Full Name (Last, First, Middle Initial) ActBlue Mailing Address P.O. Box 382110 City	State Z	Zip Code	Date of Receipt M
Cambridge FEC ID number of contributing federal political committee.	MA (24	Amount of Each Receipt this Period 1000.00
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Conduit total liste Aggregate Year-		[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Full Name (Last, First, Middle Initial) Robert K Musil Mailing Address 8600 Irvington Avenue			Date of Receipt 07 10 2014
City Bethesda		Zip Code 20817	Transaction ID : C9675387A Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer American University Receipt For: Primary General Other (specify)	Occupation Professor Aggregate Year-	to-Date ▼ 250.00	* Earmarked Contribution: See Below
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 9 OF 19 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Oceans PAC Full Name (Last, First, Middle Initial) ActBlue Date of Receipt Mailing Address P.O. Box 382110 2014 07 16 City Zip Code State Transaction ID: C9675387AB Cambridge MA 02238 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C00401224 federal political committee. Name of Employer Occupation Conduit total listed in Agg. field Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Note: Above Contribution earmarked through this 12999.21 Other (specify) organization. Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 0.00 SUBTOTAL of Receipts This Page (optional)..... 13250.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 19 (check only one) 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Oceans PAC		erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) American Dental Association Politica Mailing Address 1111 14th Street, NW Suite 1100 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For:	I Action Committee State Zip Code DC 20005 C C00000729 Occupation Aggregate Year-to-Date ▼	Date of Receipt 07 19 2014 Transaction ID: C9681520 Amount of Each Receipt this Period 5000.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Property Casualty Insurers Associa	5000.00 stion of America PAC	Date of Receipt
Mailing Address 8700 West Bryn Mawr, Suite City Chicago FEC ID number of contributing federal political committee. Name of Employer	State Zip Code	07 25 2014 Transaction ID : C9696111 Amount of Each Receipt this Period 5000.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Wal-Mart Stores Inc. PAC for Res Mailing Address 702 S.W. 8th Street City Bentonville	State Zip Code AR 72716	Date of Receipt 07 19 2014 Transaction ID: C9681522 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	C C00093054 Occupation	2500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	<u> </u>	12500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 19 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Oceans PAC			erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Microsoft Corporation Political Action (Mailing Address 16011 NE 36th Way Box 97017 City Redmond FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State WA C Coo	Zip Code 98073 0227546	Date of Receipt 07
Full Name (Last, First, Middle Initial) Covington and Burling LLP PAC Mailing Address 1201 Pennsylvania Avenue, N City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State DC C Coo	Zip Code 20004 0462630 Year-to-Date ▼	Date of Receipt O7 23 2014 Transaction ID : C9688943 Amount of Each Receipt this Period 1500.00
Full Name (Last, First, Middle Initial) National Cable & Telecommunicat Mailing Address 25 Massachusetts Avenue NV #100 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State DC C C00 Occupation	Zip Code 20001 0010082	Date of Receipt 07 23 2014 Transaction ID : C9688944 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		· · · · · · · · · · · · · · · · · · ·	7500.00
TOTAL This Period (last page this line number	only)	·····	

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 12 OF 19			
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)			
			Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17			
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) Oceans PAC						
<u>/_</u> А.	Full Name (Last, First, Middle Initial) A. CVS/Caremark Corporation Employee's PAC			Date of Receipt			
	Mailing Address 1300 Eye Street, NW Suite 525W			07 29 2014			
	City	State DC	Zip Code	Transaction ID : C9711257			
	Washington	DC	20005	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C co	0384818	5000.00			
	Name of Employer	Occupation	1				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		5000.00				
 В.	Full Name (Last, First, Middle Initial) American Association Of Nurse Anes	sthetists F	PAC	Date of Receipt			
	Mailing Address 222 South Prospect Avenue			07 25 2014			
	City	State	Zip Code	Transaction ID : C9696109			
	Park Ridge	IL	60068	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C co	0173153	2500.00			
	Name of Employer	Occupation	1				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00				
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt			
	Mailing Address			M = M / D = D / Y = Y = Y			
	City	State	Zip Code	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С					
	Name of Employer	Occupation	1				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼				
s	UBTOTAL of Receipts This Page (optional)			7500.00			
Γ,	OTAL This Pariod (last page this line number o	ınlv)		27500.00			

TOTAL This Period (last page this line number only).....

S 17

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 13 OF 19			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(oricon orii)			
	Detailed Summary Page	X 21b	22	23 24 25 26 28b 28c 29 30b	
	<u> </u>	27	28a		
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
Oceans PAC					
Full Name (Last, First, Middle Initial)					
A. McGrath Clambakes, Inc.			Date of Di	sbursement / Y Y Y Y Y Y	
Mailing Address 64 Halsey Street #5			07 22 2014		
City	State Zip Code			. 15 54444	
Newport	RI 02840		Transact	ion ID : D441410	
Purpose of Disbursement Catering			Amount of	Each Disbursement this Period	
Candidate Name		Category/			
		Type		8999.14	
	ement For:				
Senate	Primary General				
State: President State:	Other (specify)				
B. Sailing Excursions Inc			Date of Di	sbursement	
B. Sailing Excursions, Inc.			M M /		
Mailing Address PO Box 1155				07 31 2014	
City Newport	State Zip Code RI 02840		Transact	tion ID : D441740	
Purpose of Disbursement	102040				
Charter Fee			Amount of	Each Disbursement this Period	
Candidate Name		Category/			
		Type		1530.00	
	ement For:				
Senate	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C. Merchant Account Services	Date of Di	sbursement			
Werdhallt Account Gervices	M M /	D D / Y Y Y Y			
Mailing Address P.O. Box 6600	Mailing Address P.O. Box 6600			03 2014	
City	State Zip Code		_		
Hagerstown	MD 21740		Transact	tion ID : D442000	
Purpose of Disbursement Credit Card Processing Fee					
•			Amount of	Each Disbursement this Period	
Candidate Name		Category/		93.34	
Office Sought: House Disburs	ement For:	Type			
Senate	Primary General				
President	Other (specify)				
State: District:	**				
'					
SUBTOTAL of Disbursements This Page (optional)				10622.48	
		<u> </u>			
TOTAL This Period (last page this line number onl	y)			<i></i>	

17

SCHEDULE B (FEC Form 3X)	, , , , , , , , , , , , , , , , , , , ,	FOR LINE	NUMBER:	PAGE 14 OF 19	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)			
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
Oceans PAC					
Full Name (Last, First, Middle Initial)					
A. ActBlue Technical Services			Date of Disburseme		
Mailing Address 14 Arrow Street			07 20 / 2014		
City	State Zip Code		Transaction ID : [2444500	
• a.m.s.rage	MA 02138		Transaction iD . I	J44 1300	
Purpose of Disbursement Credit Card Processing Fee			Amount of Each Di	sbursement this Period	
Candidate Name		Category/ Type	7	23.19	
	nent For: Primary General Other (specify)				
State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
B. Merchant Account Services			Date of Disburseme	_	
Mailing Address P.O. Box 6600			07 03 2014		
City	State Zip Code		Towns of the ID.	D.440004	
. age.e.e	MD 21740		Transaction ID : I	D442001	
Purpose of Disbursement Credit Card Processing Fee			Amount of Each Di	sbursement this Period	
Candidate Name		Category/ Type		35.12	
Office Sought: House Disbursen	nent For:	71	,	,	
	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)			Data of Dishaman		
C. ActBlue Technical Services			Date of Disburseme	_	
Mailing Address 14 Arrow Street			07 06	2014	
City	State Zip Code		Tropposition ID	D440E72	
Cambridge	MA 02138		Transaction ID: I	U44U3/2	
Purpose of Disbursement Credit Card Processing Fee	Amount of Each Disbursement		shursement this Period		
Candidate Name		Category/ Type	Amount of Each Di	200.01	
Office Sought: House Disbursen	nent For:	. , , , ,			
	Primary General				
President State: District:	Other (specify) ▼				
State. District.					
SUBTOTAL of Disbursements This Page (optional)		······•		258.32	
TOTAL This Period (last page this line number only).					

ľ

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 15 OF 19				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	(check only one)			
	Detailed Summary Page	X 21b 27	22 23 24 25 28a 28b 28c 29	26 30b		
Anna information and information						
Any information copied from such Reports and Sta or for commercial purposes, other than using the n						
NAME OF COMMITTEE (In Full)						
Oceans PAC						
/						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
A. Merchant Account Services	Merchant Account Services					
Mailing Address P.O. Box 6600			07 03 2014			
				4		
City	State Zip Code		Transaction ID : D442002			
Hagerstown Purpose of Disbursement	MD 21740					
Credit Card Processing Fee			Amount of Each Disbursement this Per	riod		
Candidate Name		Category/				
		Type	0.01			
	sement For:					
Senate President	Primary General					
State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
B. Merchant Account Services			Date of Disbursement			
			M = M / D = D / Y = Y = Y	1		
Mailing Address P.O. Box 6600			07 02 2014			
City	City State Zip Code					
Hagerstown	MD 21740		Transaction ID : D442003			
Purpose of Disbursement Credit Card Processing Fee			American of Foods Diobuscoment this Dou			
Candidate Name			Amount of Each Disbursement this Per	100		
Caradate Hame		Category/ Type	168.93	3		
Office Sought: House Disburs	sement For:	.,,,,				
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
C. ActBlue Technical Services						
Mailing Address 14 Arrow Street			07 13 2014			
	The state of the s			4		
City	State Zip Code		Transaction ID : D442004			
Cambridge Purpose of Disbursement	MA 02138					
Credit Card Processing Fee		Amount of Each Disbursement this Per	riod			
Candidate Name		Category/				
		Type	212.67	7		
	sement For:		-			
Senate	Primary General					
President State: District:	Other (specify) ▼					
Otato. District.						
SUBTOTAL of Disbursements This Page (optional)		381.61			
COLIDER OF SIGNATURE THIS Fage (Optional	,			#		
TOTAL This Period (last page this line number or	ly)	·····•				

SCHEDULE B (FEC Form 3X)	Han annual 1 1 2 4 3	FOR LINE NUMBER: PAGE 16 OF				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 21b 22 23		24 25 26		
	1	27	28a 28b	28c 29 30		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)	and address of any point					
Oceans PAC						
Full Name (Last, First, Middle Initial)						
A. Perkins Coie, LLP			Date of Disbursem			
Mailing Address 1201 Third Avenue Suite 4900	07 30 2014					
City	State Zip Code			Transaction ID : D441735		
Seattle Purpose of Disbursement	WA 98101		Transaction is:	D-11100		
Legal & Complinace Services			Amount of Each D	isbursement this Period		
Candidate Name		Category/ Type		1506.60		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)						
3. ActBlue Technical Services			Date of Disbursem			
Mailing Address 14 Arrow Street			07 27 2014			
City Cambridge	State Zip Code MA 02138		Transaction ID :	D442005		
Purpose of Disbursement Credit Card Processing Fee			Amount of Each D	isbursement this Period		
Candidate Name		Category/ Type	7	78.31		
Senate President	ment For: Primary General Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) Sweet Berry Farm			Date of Disbursem			
Mailing Address 19 3rd Beach Rd		07 23	2014			
City Middletown	State Zip Code RI 02842-5332		Transaction ID :	D441446		
Purpose of Disbursement	747 02042 0002					
Catering Candidate Name		0.1	Amount of Each D	isbursement this Period		
		Category/ Type		625.35		
Senate President	ment For: Primary General Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional).				2210.26		
TOTAL This Period (last page this line number only	·)					

17

SCHEDULE B (FEC Form 3X)		, FOR LINE	NUMBER:	PAGE 17 OF 19	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(check only one)			
	Detailed Summary Page		22 23 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full)	ne and address of any pon	tiodi committee te	Solicit contributions	nom saon committee.	
Oceans PAC					
Full Name (Last, First, Middle Initial)					
A. Citibank F.S.B.			Date of Disburser		
Mailing Address 1400 G Street, NW			07 08 2014		
City	State Zip Code		Transaction ID :	D441006	
Washington	DC 20005		Transaction iD .	D44 1990	
Purpose of Disbursement Bank Fee			Amount of Each [Disbursement this Period	
Candidate Name		Category/		62.15	
Office Sought: House Disburser	ment For:	Type			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)			Date of Disburser	nont	
B. Viking Tours of Newport			M M / D		
Mailing Address P.O. Box 330			07 23 2014		
City	State Zip Code		Transaction ID	- D441447	
Newport	RI 02840		Transaction ID	: D441447	
Purpose of Disbursement Transportation		Amount of Each Disbursement this Per			
Candidate Name		Category/		742.65	
		Type		743.65	
Office Sought: House Disburser					
Senate President	Other (specify) General				
State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
C. American Express			Date of Disburser	nent	
			M M / D I		
Mailing Address P.O. Box 53852			07 01	2014	
City	State Zip Code		Transaction ID	D444007	
Phoenix	AZ 85072		Transaction ID	: D441997	
Purpose of Disbursement Credit Card Processing Fee					
Candidate Name		Category/	Amount of Each I	Disbursement this Period	
		Type		7.95	
Office Sought: House Disburser				,	
Senate	Primary General				
State: District:	Other (specify) ▼				
Side. District.					
SUBTOTAL of Disbursements This Page (optional)				813.75	
TOTAL This Period (last page this line number only)					

17

SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER:	PAGE 18 OF 19	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)			
	Detailed Summary Page	21b	22 23 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)	The and address of any point	car committee to	30licit contribution	3 Hom Such Committee.	
Oceans PAC					
Full Name (Last, First, Middle Initial)					
A. Trilogy Interactive, LLC			Date of Disbursement		
Mailing Address PO Box 4177			07	23 2014	
City	State Zip Code		Transaction II	D . D441449	
Mountain View	CA 94040		Transaction ii	D : D441446	
Purpose of Disbursement Internet Consulting & Website Services			Amount of Each	n Disbursement this Period	
Candidate Name		Category/ Type		3835.59	
Office Sought: House Disburse	ment For:				
Senate	Primary General				
President	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial)			Date of Disburs	ement	
B. American Express					
Mailing Address P.O. Box 53852			07 07 2014		
City	State Zip Code		Transaction II	D · D//1008	
Phoenix	AZ 85072		Transaction	D . D441990	
Purpose of Disbursement Credit Card Processing Fee			Amount of Each	Disbursement this Period	
Candidate Name		Category/ Type		144.65	
Office Sought: House Disburse	ment For:	,,,		,	
Senate	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C. Campaign Finance Consultants			Date of Disburs		
Mailing Address 10 G Street, NW				07 2014	
Suite 570 City	State Zip Code				
Washington Purpose of Disbursement	DC 20002		Transaction II	D : D438599	
Fundraising Consulting, Travel, Catering & Fundra		Amount of Each	Disbursement this Period		
Candidate Name		Category/ Type		7676.02	
Office Sought: House Disburse	ment For:				
Senate	Primary General				
President	Other (specify)				
State: District:					
SUBTOTAL of Disbursements This Page (optional).				11656.26	
TOTAL This Period (last page this line number only	·)		1	25942.68	

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 19 C			
TEMIZED DISBURSEMENTS	SBURSEMENTS Use separate schedule(s) (check only one)		,		
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Statem	ponts may not be sold or use				
or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
Oceans PAC					
/ Full Name (Last, First, Middle Initial)					
A. People for Rick Weiland			Date of Disburseme	ent	
r eopie for Rick Welland			M M / D D	/ Y Y Y Y	
Mailing Address PO Box 1488			07 29 2014		
City	State Zip Code				
•	SD 57105		Transaction ID : I	D441673	
Purpose of Disbursement					
Contribution		L	Amount of Each Di	sbursement this Period	
Candidate Name		Category/		2500.00	
Richard P. Weiland Office Sought: House Disbursem	nent For: 2014	Туре	7	7	
	Primary X General				
	Other (specify) ▼				
State: SD District:					
Full Name (Last, First, Middle Initial)					
3.			Date of Disburseme	ent	
Mailing Address			M M / D D	/ Y Y Y Y	
ag / tee. eee					
City	state Zip Code				
Purpose of Disbursement					
r dipose of bisbursement			Amount of Each Di	sbursement this Period	
Candidate Name		Category/			
		Type			
Office Sought: House Disbursem					
	Primary General Other (specify) ▼				
State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
C.			Date of Disburseme	ent	
			M M / D D	/	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
Candidate Name			Amount of Each Di	sbursement this Period	
		Category/ Type			
Office Sought: House Disburser	nent For:				
	Primary General				
State: District:	Other (specify) ▼				
State. District.					
SUBTOTAL of Disbursements This Page (optional)				2500.00	
TOTAL This Period (last page this line number only).				2500.00	